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Suite 2000	2009	Roberta K. Johnson (Depositor's					name)			
Des Moines, IA	50309		(a)				ta K.	. / - /	(Sign	nature)
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APPLICATION NO.	FILING DATE			FIRST NAMED INVENT				RNEY DOCKET NO.	CONFIRMATION NO.	
10/679,072	10/679.072 10/03/2003			Rodney Fulton					3389	
TITLE OF INVENTION	: APPARATUS FOR VI	ENTING C)F PROTECTI	VE PANELS			150	035/0001		
APPLN. TYPE	SMALL ENTITY	ISSUE	FEE DUE	PUBLICATION FEE I	DUE	PREV. PAID IS	SUE FEE	TOTAL FEE(S) DUE	DATE DUE	
nonprovisional	YES	\$755		\$300		\$0 :38/1	8/289Q :	\$1055 SDENBOB4 @0000021	10/14/2009	
EXAMINER ART UNIT			T UNIT	CLASS-SUBCLASS				ONCHDUB4 686868CI		
KWIECINSI	KI, RYAN D		3635	052-596000		01 FC:2501 755.22 02 FC:1504 300.00				
1. Change of correspondence address or indication of "Fee Address" (37 CFR 1.363).				2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively,						
☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. ☐ "Fee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required.				(2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.						
3. ASSIGNEE NAME A	ND RESIDENCE DATA	A TO BE F	RINTED ON	THE PATENT (print	or typ	oe)				
							ignee is id	dentified below, the c	locument has been file	ed for
PLEASE NOTE: Unless an assignee is identified below, no assignee data will appear on the patent. If an assignee is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY)										
BOVARD	STUDIO, INCO	•		2281 Hi	ghw	ay 34 Ea	st, Fa	airfield, IA	52556-8560	
Please check the appropr	iate assignee category or	categories	(will not be pr	rinted on the patent):		Individual 🛚 🛣	Corporat	ion or other private gr	oup entity Govern	ıment
4a. The following fee(s)	are submitted:		. 41	· · ·	•	se first reapply	any prev	viously paid issue fee	shown above)	
Issue Fee	No small entity discount	normitted)		A check is enclo		d Form PTO-2	138 is atts	ached		
Advance Order -	Payment by credit card. Form PTO-2038 is attached. The Director is hereby authorized to charge the required fee(s), any deficiency, or credit any overpayment, to Deposit Account Number 503021 (enclose an extra copy of this form).									
		1 -1>		overpayment, to	Depo	sit Account Nu	nber <u>5U</u>	3UZ 1 (enclose a	nn extra copy of this fo	rm).
 Change in Entity Sta a. Applicant claim 	tus (from status indicate is SMALL ENTITY stati		CFR 1.27.	☐ b. Applicant is n	o long	ger claiming SN	IALL EN	TITY status. See 37 C	FR 1.27(g)(2).	
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Authorized Signature	But 1	liba	·			Date	Augus	t 5, 2009		
Typed or printed nam	_c Camille L.	Urbai	<u>1</u>			Registratio	n No	46,948		
This collection of inform	nation is required by 37 (CFR 1.311.	The information	on is required to obtai	n or r	etain a benefit l	y the pub	lic which is to file (an	d by the USPTO to pro	ocess)

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	ENCE ADDRESS (Note: Use BI	ock I for any change of address)	Faa	Note: A certificate of mailing can only be used for domestic mailings of the Fee(s) Transmittal. This certificate cannot be used for any other accompanying papers. Each additional paper, such as an assignment or formal drawing, must have its own certificate of mailing or transmission.				
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Suite 2000	50200		£5/ I	Roberta K. Johr	ison	(Depositor's name)		
Des Moines, IA	30309	& TOA	DEMAPSING	Doberta X.	Johnson	(Signature)		
				August 5, 2009		(Date)		
APPLICATION NO.	FILING DATE	· ·	FIRST NAMED INVENTOR	ATTO	RNEY DOCKET NO.	CONFIRMATION NO.		
10/679,072 10/03/2003 FITLE OF INVENTION: APPARATUS FOR VENTING OF PROTECT			Rodney Fulton VE PANELS	15035/0001		3389		
APPLN. TYPE	SMALL ENTITY	ISSUE FEE DUE	PUBLICATION FEE DUE	PREV. PAID ISSUE FEE	TOTAL FEE(S) DUE	DATE DUE		
nonprovisional	YES	<u>.</u> \$755	\$300	\$0	\$1055	10/14/2009		
EXAM	EXAMINER		CLASS-SUBCLASS]				
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Address form PTO/SI	oondence address (or Cha B/122) attached. lication (or "Fee Address 02 or more recent) attach	inge of Correspondence	2. For printing on the patent front page, list (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed.					
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	s SMALL ENTITY state	us. See 37 CFR 1.27.		ger claiming SMALL EN				
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Typed or printed nam	e Camille L.	Urban	 	Registration No	16,948			
an application. Confiden submitting the complete this form and/or suggesti Box 1450, Alexandria, V Alexandria, Virginia 223	tiality is governed by 35 d application form to the cons for reducing this bu /irginia 22313-1450. DC 113-1450.	U.S.C. 122 and 37 CFR e USPTO. Time will vary rden, should be sent to th) NOT SEND FEES OR	1.14. This collection is est depending upon the indicate Chief Information Offic COMPLETED FORMS T	retain a benefit by the pub timated to take 12 minute: vidual case. Any commen er, U.S. Patent and Trader O THIS ADDRESS. SEN formation unless it display	is to complete, including is on the amount of tim nark Office, U.S. Depa D TO: Commissioner fo	by the USPTO to process), gathering, preparing, and the you require to complete rtment of Commerce, P.O. or Patents, P.O. Box 1450, number.		